



**Danny Rhynes Interagency Training Center**  
**602 S. Tippecanoe Ave.**  
**San Bernardino, CA 92408**  
**(909) 382-2984 Fax (909) 382-4192**  
**Email: drtc@fs.fed.us**

## **Memorandum**

**DATE: December 6, 2013**

**SUBJECT: S-336 Tactical Decision Making**

**TO: Course Participant**

You have been selected to attend the S-336 Tactical Decision Making training session at the Danny Rhynes Training Center on January 27-30, 2014. **Class will begin at 0900 hours on Monday, January 27, and conclude at approximately 1700 hours on Thursday, January 30.**

### **Course Description:**

This course is designed to meet training requirements in the Operations Section of the Incident Command System. Examples and exercises in this package are specific to wildland fire suppression.

### **Trainee prerequisites are:**

Fully qualified Single Resource Boss and/or Incident Commander T4.

1. Successful completion of S-290 Basic Fire Behavior/or agency equivalent.

Attached, you will find the Tactical Decision Making in Wildland Fire Pre-Course workbook that you will need to read before the start of class. Please bring this with you and be prepared to discuss. You can find the course guide online at

<http://training.nwcg.gov/pre-courses/s336/s336.html>

### **Please bring the following items to class the first day:**

1. Fireline Handbook that includes Appendix "B."
2. NFES 2120 – Tactical Decision Making in Wildland Fire.

**\*\*ALL STUDENTS:** Please complete and return the pre-registration form to the training center no later than close of business **Monday, January 13, 2014**. FAX copies are sufficient.

**Tuition:**

Your tuition cost is **\$300.00**

All students must submit a NWCG Nomination Form with proper agency charge codes and signatures for payment. Forms can be attained on-line at: "nationalfiretraining.net".

**Billing Information:**

**Forest Service (Other Regions):** The approved NWCG Nomination Form will be used for payment. This form must include proper agency charge codes and signatures.

**Other Federal Agencies:** The approved NWCG Nomination Form will be used for payment. This form must include proper agency codes, agreement numbers and signatures.

**Other Non Federal Agencies:** It is recommended that students pay with check or money order at the facility at the start of class. There is an additional 8% administrative fee added to this tuition charge. If payment is not received, a bill of collection will be issued to your agency.

**Cancellations:** Cancellations must be made two weeks prior to the course start date. If a cancellation occurs after the two-week cut off and the slot goes unfilled, there will be a charge not to exceed the tuition charge for the course. **The last date to cancel for this course is January 13, 2014.**

If a student cancels within the two-week period and pre work has already been received, the student needs to return pre work to the training facility.

**Travel:** For travel and lodging information navigate on the internet to the DRTC website: <http://www.fs.usda.gov/goto/sanbernardino/travel>

**Dress:** Students are to wear casual office attire. This means attire suitable for public contact (no shorts, tank tops, flip flops, etc).

Any questions regarding this course may be directed to your unit training coordinator or appropriate training representative. If you are self-sponsored, you may contact the training center directly at [drtc@fs.fed.us](mailto:drtc@fs.fed.us)

**Kristel Johnson**  
Forest Training Officer

Enclosures:

Driving Directions, Lodging Information & Local Area Map  
All Student, Pre-Registration Form  
S-336 Pre-work

**PRE-REGISTRATION FORM**  
**DANNY RHYNES INTERAGENCY TRAINING CENTER**  
**FAX: 909-382-4192**

ALL Blocks MUST be Completed

**Course**

**Title:** S-336 Tactical Decision Making **Date:** Jan 27-30, 2014

**Trainee Name** \_\_\_\_\_ **Email** \_\_\_\_\_

**Agency:**

FS: Forest: \_\_\_\_\_ District: \_\_\_\_\_

Region \_\_\_\_\_ Unit: \_\_\_\_\_

Other Agency: \_\_\_\_\_ *(Ranger Unit/Station)*

*(County – City – OES – CHC Student – NPS – BLM – USCG / Use your three letter designator.)*

**Work Address:** \_\_\_\_\_

*(Mailing Address of your unit headquarters.) (City – State – Zip Code)*

**Phone**

**Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Supervisor Name/Title** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Training Officer Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**RETURN THIS FORM TO THE**  
**TRAINING CENTER**  
**BY COB:**

**January 13, 2014**